

*Sayers-Roods, et al. v. Machado (CAND, May 25, 2022)*

# **EXHIBIT A**

POA AGREEMENT AS TO  
ANN-MARIE SAYERS  
(APPOINTING SAYERS-ROODS &  
HEINZ AS POA AGENTS);

SAYERS'S POA TERMINATION LETTER  
(DANNY SHEEHAN);

AND

DOI TRUST LAND ALLOTMENT PAPERS AS  
TO ANN-MARIE SAYERS OF  
THE COSTANOAN INDIAN TRIBE

## **DURABLE POWER OF ATTORNEY FOR HEALTH CARE, ET SEQ.**

I, Ann Marie Sayers, of Indian Canyon Ranch, 1 Indian Canyon Road, Hollister, California, being of sound mind, voluntarily create this Durable Power of Attorney for Health Care (see *Additional Instructions* hereinunder).

### **PRIOR DESIGNATIONS**

On this 21st day of March, 2022, I revoke any prior Durable Power of Attorney Agreements.

### **APPOINTMENT OF HEALTH CARE AGENT**

Thereby, the person(s) listed herein under, I wish to designate as my agent(s) for health care decisions, inter alia as disclosed hereunto:

Charles F. Heinz, Jr.

P.O. Box 32122

San Jose, California, 95152

Telephone: (925) 389-9674

Relationship: Friend of 25+ Years and Business Associate at Costanoan Indian Research Inc.

### **APPOINTMENT OF ALTERNATE HEALTH CARE AGENT**

If I revoke Charles F. Heinz, Jr.'s authority or if Charles F. Heinz, Jr. is not willing, able, or reasonably available to make a health care decision for me, I designate as my alternate agent:

Kanyon Sayers-Roods

Indian Canyon Ranch, 1 Indian Canyon Road

Hollister, California, 95023

Telephone: (831) 207-9331

Relationship: Daughter and Business Associate at Costanoan Indian Research Inc.

### **AGENT'S AUTHORITY**

My agent(s) is/are authorized to act for me in all matters relating to my health care. My agent's powers include, but are not limited to:

- Full power to consent, refuse consent, or withdraw consent to all medical, surgical, hospital and related health care treatments and procedures on my behalf, according to my wishes as stated in this document, or as stated in a separate Living Will, Health Care Directive, or other similar type document, or as expressed to my agent by me;
- Full power to make decisions on whether to provide, withhold, or withdraw artificial nutrition and hydration on my behalf, according to my wishes as stated in this document, or as stated in a

separate Living Will, Health Care Directive, or other similar type document, or as expressed to my agent by me;

- Full power to review and receive any information regarding my physical or mental health, including medical and hospital records, in accordance with the *Health Insurance Portability and Accountability Act of 1996*, 42 USC 1320d ("HIPAA"), and the *American Recovery and Reinvestment Act of 2009* ("ARRA");
- **Full power to sign any releases in order to obtain this information;**
- **Full power to sign any documents required to request, withdraw, or refuse treatment or to be released or transferred to another medical facility, inter alia disclosed hereunto.**

My agent does not have authority to act for me for any other purpose unrelated to my health care, or *Additional Instructions* listed herein below. All of my agent's actions under this power during any period when I am unable to make or communicate health care decisions have the same effect on my heirs, devisees and personal representatives as if I were competent and acting for myself.

#### WHEN AGENT'S AUTHORITY BECOMES EFFECTIVE

The designation of my health care agent will become effective here and now, and will remain in effect until my death, or until I regain competence and revoke it.

#### AGENT'S OBLIGATIONS

My agent will make health care decisions for me in accordance with this document, and in accordance with any instructions I give in a Living Will, Health Care Directive or other such document (either included in this document or as a separate document), and my other wishes to the extent known to my agent. To the extent my wishes are unknown, my agent will make health care decisions for me in accordance with what my agent determines to be in my best interest. In determining my best interest, my agent will consider my personal values to the extent known to my agent.

#### NOMINATION OF CONSERVATOR OR GUARDIAN

If a conservator or guardian of my person needs to be appointed for me by a court, I nominate Charles F. Heinz, Jr., the agent designated in this form. If Charles F. Heinz, Jr. is not willing, able, or reasonably available to act as conservator, I nominate Kanyon Sayers-Roods, the alternate agent designated in this form. My nominated conservator or guardian is not required to post bond or security.

#### EFFECT OF COPY

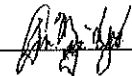
A copy of this Durable Power of Attorney for Health Care has the same effect as the original.

#### SEVERABILITY

If any part or parts of this Durable Power of Attorney for Health Care is found to be invalid or illegal under applicable law by a court of competent jurisdiction, the invalidity or illegality of such part or parts shall not in any way affect the remaining parts, and this document shall be construed as though the invalid or illegal part or parts had never been included herein. But if the intent of this Durable Power of Attorney for Health Care would be defeated by such construction, then it shall not be so construed.

SIGNATURE

This Durable Power of Attorney for Health Care is made after careful reflection, while I am of sound mind. I am fully informed as to all contents of this document and understand the full import of this grant of powers to my agent. I fully understand that by signing this document, I will permit my agent to make health care decisions for me. I understand that my signature on this document gives my agent authority to provide, withhold, or withdraw consent to health care treatments or procedures on my behalf; to apply for public benefits to defray the cost of my health care; and to authorize my admission to or transfer from a health care facility. I further affirm that I am not signing this document as a condition of treatment or admission to a health care facility.

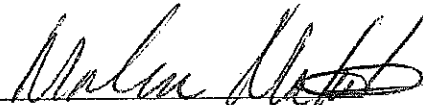
Signature: 

Name: Ann Marie Sayers

Date: March 21, 2022

Place: Indian Canyon Ranch ("Indian Country"), Hollister, CA 95023, California

Witness-1:

  
Signature

MARLENE MACLAREN  
Print Name

Witness-2:

  
Signature

KANYON SAYERS-ROODS  
Print Name

NOTARY ACKNOWLEDGEMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF CALIFORNIA

COUNTY OF San Benito

On this 21st day of March, 2022, before me, Vanessa Noelle Milla personally appeared: Ann Marie Sayers, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that ~~he~~/she executed the same in ~~his~~/her authorized capacity, and that by ~~his~~/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

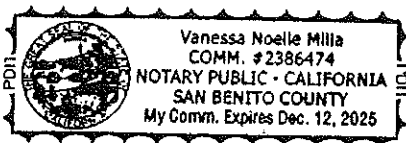
I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

V. Milla

Notary Public

Vanessa Noelle Milla  
(print name)



## INSTRUCTIONS FOR HEALTH CARE

If I, Ann Marie Sayers, become incapacitated and am unable to direct my health care providers as to my own health care, I direct that this statement be read as a true reflection of my health care wishes.

### DEFINITIONS

For the purposes of this document, the following definitions apply:

1. **"Artificially administered food and water"** (or artificial nutrition and hydration) means the provision of nutrients or fluids by a tube inserted in vein, under the skin in the subcutaneous tissues, or in the stomach (gastrointestinal tract).
2. **"Attending physician"** means the physician licensed by the state board of medicine, selected by or assigned to the patient, and who has primary responsibility for the treatment and care of the patient.
3. **"Comfort care"** means treatment, including prescription medication, provided to the patient for the sole purpose of alleviating pain. Artificially administered food and water is not included.
4. **"Health care provider"** or "provider" means any person licensed, certified, or otherwise authorized by law to administer health care in the ordinary course of business or practice of a profession.
5. **"Irreversible (Permanent) Coma"** means a profound state of unconsciousness caused by disease, injury, poison, or other means and for which it has been determined that there exists no reasonable expectation of regaining consciousness.
6. **"Life-prolonging procedure"** (or **"life-sustaining procedure"**) means any medical procedure, treatment, or intervention which sustains, restores, or supplants a spontaneous vital function. In this document the term does not include sustenance and hydration administration, or the provision of medication or the performance of medical procedure, when such medication or procedure is deemed necessary to provide comfort care or to alleviate pain.
7. **"Persistent vegetative state"** means a permanent and irreversible condition in which there is:
  - a. The absence of voluntary action or cognitive behavior of any kind.
  - b. An inability to communicate or interact purposefully with the environment.
8. **"Terminal condition"** means a condition caused by injury, disease, or illness from which there is no reasonable medical probability of recovery and which, without treatment, can be expected to cause death.

MEDICAL DIRECTIONS AND END-OF-LIFE DECISIONS

I direct that my health care providers and others involved in my care, provide, withhold, or withdraw treatment in accordance with my directions below:

1. If I have an incurable and irreversible (terminal) condition that will result in my death within a relatively short time, I direct that:
  - I be kept on any artificial life support as long as possible within the limits of generally accepted health care standards.
  - I be artificially administered food and water, even if that has the effect of prolonging my life.
  - I be provided comfort care, and relief from pain, including any pain reduction medication, even if doing so would prolong my life.
2. If I am diagnosed as being in an irreversible coma and, to a reasonable degree of medical certainty, I will not regain consciousness, I direct that
  - I be kept on any artificial life support as long as possible within the limits of generally accepted health care standards.
  - I be artificially administered food and water, even if that has the effect of prolonging my life.
  - I be provided comfort care, and relief from pain, including any pain reduction medication, even if doing so would prolong my life.
3. If I am diagnosed as being in a persistent vegetative state and, to a reasonable degree of medical certainty, I will not regain consciousness, I direct that:
  - I be kept on any artificial life support as long as possible within the limits of generally accepted health care standards.
  - I be artificially administered food and water, even if that has the effect of prolonging my life.
  - I be provided comfort care, and relief from pain, including any pain reduction medication, even if doing so would prolong my life.

ADDITIONAL INSTRUCTIONS

I decree that my agent shall act on my behalf in any lawful circumstance(s), respective to, but no limited

to Indian Canyon Ranch under 18 U.S.C. 1151, as follows:

- (a) Real property transactions;
- (b) Tangible personal property transactions;
- (c) Stock and bond transactions;
- (d) Commodity and option transactions;
- (e) Banking and other financial institution transactions;
- (f) Business operating transactions;
- (g) Insurance and annuity transactions;
- (h) Estate, trust and other beneficiary transactions,
- (i) Claims and litigation;
- (j) Personal and family maintenance;
- (l) Benefits from social security, Medicare, Medicaid, SSI, or other governmental programs, or civil or military service;
- (m) Retirement plan transactions; and
- (n) Tax matters. I understand that I may change the above-listed directives at any time by revoking this declaration and writing a new one.

EFFECT OF COPY

A copy of this Instructions for Health Care has the same effect as the original.

SEVERABILITY

If any part or parts of this Instructions for Health Care is found to be invalid or illegal under applicable law by a court of competent jurisdiction, the invalidity or illegality of such part or parts shall not in any way affect the remaining parts, and this document shall be construed as though the invalid or illegal part

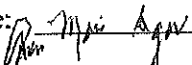


or parts had never been included herein. But if the intent of this Instructions for Health Care would be defeated by such construction, then it shall not be so construed.

**SIGNATURE**

Pursuant to 28 U.S.C. 1746, there among other certifications hereunto, this document is made upon careful reflection. Options that I have considered and rejected are not printed above. I confirm that the health care directions contained herein were made after careful consideration and in full awareness of other options that may have been available to me. I declare that I am an adult in the State of California, that I understand the full import of this declaration, and that I am emotionally and mentally competent to give these directions.

Signed at Indian Canyon Ranch ("Indian Country"), Hollister, CA 95023, in the State of California, this 21st day of March, 2022.

Signature:  \_\_\_\_\_

Name: Ann Marie Sayers

Address: Indian Canyon Ranch, 1 Indian Canyon Road  
Hollister, California

CERTIFICATE OF ACKNOWLEDGMENT OF NOTARY PUBLIC

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF CALIFORNIA

COUNTY OF San Benito

On this 21st day of March, 2022, before me, Vanessa Noelle Milla personally appeared: Ann Marie Sayers, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

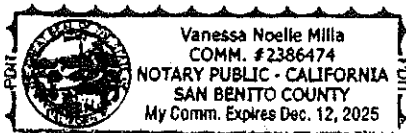
I certify under PENALTY OF PERJURY under the laws of the State of California, and 28 U.S.C. 1746 (as to *Indian Country*) that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

V. Milla

Notary Public

Vanessa Noelle Milla  
(print name)



Ann Marie Sayers  
Indian Canyon Ranch  
1 Indian Canyon Road  
P.O. Box 28  
Hollister, CA 95023

March 21, 2021

ATTN TO: Daniel ("Danny") P. Sheenan  
<[info@romeroinstitute.org](mailto:info@romeroinstitute.org)>,  
<[info@lakotalaw.org](mailto:info@lakotalaw.org)>

**IN RE: TERMINATION NOTICE (DURABLE GENERAL POWER OF ATTORNEY)**

Dear Mr. Sheenan:

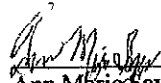
This letter shall serve as an official notice of termination of Durable General Power of Attorney Agreement ("Agreement"), executed by and between "Ann Marie Sayers" and "Danny Sheenan" ("POA") on or about January 30, 2022.

Thereby, I request that:

1. All activities as POA in accordance with Agreement terminate immediately.
2. Any written or oral correspondence from respective persons or organizations concerning me, or any personal, business, financial, or equitable interest will be redirected to me via email ([info@indiancanyonlife.org](mailto:info@indiancanyonlife.org)) or standard mail at P.O. Box 28, Hollister, CA 90523.
3. Any applicable property or materials in your possession be transferred to me via email ([info@indiancanyonlife.org](mailto:info@indiancanyonlife.org)) or standard mail at P.O. Box 28, Hollister, CA 90523. (Please contact me via email if you have any shipping costs that require payment for the return of property.)

I want to thank you for your prior efforts as my POA. Kindly accept this official notice with the warmest regards, wishing you the best in your future endeavors to support Native American rights awareness.

Respectfully,

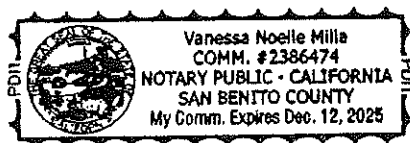
  
Ann Marie Sayers

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The notary public of San Benito County, California, presently at Indian Canyon Ranch pursuant to 18 U.S.C. 1151, certifies that Ann Marie Sayers has been duly identified with government-issued document(s) or witnesses, whereof shall authenticate the undersigning herein above.

  
Notary Public Signature

03-21-2022  
Date



Form 1860-8  
(May 1983)

# The United States of America

To all to whom these presents shall come, Greeting:

Serial No. CACA 12519

500 042

WHEREAS,

Ann Marie Sayers,  
an Indian of the Costanoan Tribe,

is entitled to a trust patent pursuant to Sec. 4 of the Act of February 8, 1887, as amended (25 U.S.C. 334), for the following described land:

Mount Diablo Meridian, California

T. 14 S., R. 5 E.,  
sec. 24, lots 1, 2, and 3.

Containing 123.42 acres.

NOW KNOW YE, That the UNITED STATES OF AMERICA, in consideration of the premises, has allotted and by these presents does allot, unto the said Indian, the land above described, and hereby declares that it does and will hold the land thus allotted (subject to all statutory provisions and restrictions) for the period of twenty-five years, in trust for the sole use and benefit of the said Indian, and at the expiration of said period the United States will convey the same by patent to the said Indian in fee, discharged of said trust and free from all charge and encumbrance whatsoever; but in the event said Indian dies before the expiration of said trust period, the Secretary of the Interior shall ascertain the legal heirs of said Indian and either issue to them in their names a patent in fee for said land, or cause said land to be sold for the benefit of said heirs as provided by law;

EXCEPTING AND RESERVING TO THE UNITED STATES a right-of-way thereon for ditches or canals constructed by the authority of the United States. Act of August 30, 1890 (43 U.S.C. 945).

IN TESTIMONY WHEREOF, the undersigned authorized officer of the Bureau of Land Management, in accordance with the provisions of the Act of June 17, 1948 (62 Stat. 476), has, in the name of the United States, caused these letters to be made Patent, and the Seal of the Bureau to be hereunto affixed.

[SEAL]

GIVEN under my hand, in Sacramento, California the NINETEENTH day of AUGUST in the year of our Lord one thousand nine hundred and EIGHTY-EIGHT and of the Independence of the United States the two hundred and THIRTEENTH.

Patent Number 04-88-0047

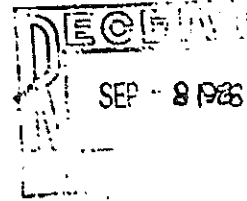
By Dick Lued  
Deputy State Director  
California State Office

9312654

RECEIVED OR FILED  
BUR. INDIAN AFFRS.  
PORTLAND AREA OFFICE

500 6401  
28 SEP 15 AM '53

BRANCH OF REALTY  
TITLES & RECORDS  
SECTION



9312654

*Doc* memorandum

DATE: SEP 7 1988  
 ACTING  
 REPLY TO: Area Director, Sacramento Area Office  
 ATTNOPI:  
 SUBJECT: New Indian Allotment, San Benito County - Ann Marie Sayers, Allottee  
 TO: Superintendent, Central California Agency  
 Attention: Realty Officer

500 6401

9312654

Attached is the original trust patent No. 04-88-0047 which was issued to Ann Marie Sayers by the Bureau of Land Management pursuant to the General Allotment Act of February 8, 1887, as amended (25 U.S.C. 334).

We were previously advised by the BLM staff that the Certificate of Eligibility (No. 472) to receive an allotment had been issued by the Central California Agency, however, we have never been provided with a copy. Upon a check of the California Judgment Roll, we found the following information regarding the subject Allottee:

Ann Marie Sayers  
 DOB: 10/13/1948  
 Mother: Elena Sayers, 1933 Census RN 6503  
 Mother's Blood Degree: 4/4 Mission San Juan Bautista.

The subject property, consisting of three lots totaling 123.42 acres, is located in San Benito County, and a copy of BLM's May 22, 1884 plat is attached.

Please assign an IRMS identification number to the Allottee and make the appropriate addition to your land records and have the patent and plat recorded at the Portland Titles and Records Section. By separate letter, we will be advising the Allottee (P.O. Box 28, Hollister, CA 95023) that the Central California Agency will have administrative jurisdiction over the subject allotment. We have been advised by the BLM that Ms. Sayers also owns an adjacent tract in fee simple.

Also attached hereto are the documents which comprise our entire case file on the subject.

*Digitized*

Attachments



UNITED STATES  
DEPARTMENT OF THE INTERIOR

BUREAU OF INDIAN AFFAIRS

Central California Agency  
1800 Tribute Road, Suite 111  
Sacramento, California 95815-4314

500 6421

9312654

This is to certify that the attached <sup>Patent</sup> ~~land~~ between U.S.A  
and Ann Marie Sayers for CACA Allotment No. 12519  
are in conformity with existing laws and regulations, and all realty  
records checked as to description, ownership and proper identification of  
grantor/grantee and conformity extends to and includes all supporting  
documents and other materials as may be specified and required in the  
Code of Federal Regulations.

Virginia A. Caputo  
Realty Officer

Approved 9-8-88

Virginia A. Caputo  
Acting Superintendent

RECEIVED OR FILED  
BUR. INDIAN AFFRS.  
PORTLAND AREA OFFICE

500 6421

88 SEP 15 A8 53

BRANCH OF REALTY  
TITLES & RECORDS  
SECTION

END OF DOCUMENT





UNITED STATES  
DEPARTMENT OF THE INTERIOR

500 6421

## BUREAU OF INDIAN AFFAIRS

Central California Agency  
1800 Tribute Road, Suite 111  
Sacramento, California 95815-4314

9312654

This is to certify that the attached <sup>Patent</sup> ~~and~~ between USA  
and Ann Marie Sayers for CACA Allotment No. 12519  
are in conformity with existing laws and regulations, and all realty  
records checked as to description, ownership and proper identification of  
grantor/grantee and conformity extends to and includes all supporting  
documents and other materials as may be specified and required in the  
Code of Federal Regulations.

Virginia A. Caputo  
Realty Officer

Approved 9-8-88

Virginia A. Caputo  
Acting Sup. Intendant

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PORTLAND AREA OFFICE

500 6421

88 SEP 15 1988

BRANCH OF REALTY  
TITLES & RECORDS  
SECTION

END OF DOCUMENT



*Sayers-Roods, et al. v. Machado (CAND, May 25, 2022)*

# **EXHIBIT B**

Sayers-Garcia, Costanoan Indian Genealogy Tree  
(BIA-Issued Roll Nos.)


*Request file for Christ  
get more info*

Name: Ann Marie Sayers  
 DOB: 12-13-48 1972 RN 56708  
 FILE: Costanman (28910)  
 FOLDER: 1891 APP: 3046

**Applicant**

Indian Blood:  
Tribe & Degree

50-28910 (29973)

Name: Christopher A Sayers  
 DOB: 12-24-51 1972 RN 56710  
 FILE: Costanman (28911)  
 FOLDER: 1890 APP: 10121

(408) 637-4238

P.O. Box 28  
Hollister, CA 95023

**Father**

N-I  
 Indian Blood:  
Tribe & Degree

BUREAU OF INDIAN AFFAIRS  
 Central California Agency  
 P.O. Box 15740  
 Sacramento, CA. 95813

(1800 Tribute Rd)

**Grandmother**

Indian Blood:  
Tribe & Degree

**Grandfather**

Indian Blood:  
Tribe & Degree

**Great-Grandfather**

Indian Blood:  
Tribe & Degree

**Great-Grandmother**

Indian Blood:  
Tribe & Degree

**Great-Grandfather**

Indian Blood:  
Tribe & Degree

**Great-Grandmother**

Indian Blood:  
Tribe & Degree

**Great-Grandfather**

Indian Blood:  
Tribe & Degree

**Great-Grandmother**

Indian Blood:  
Tribe & Degree

33 Ap. 807A

Sebastian Garcia

**Great-Grandfather**

Indian Blood:  
Tribe & Degree

33 Ap. 8078

Maria Garcia

**Great-Grandmother**

Indian Blood:  
Tribe & Degree

3/4

Evangelista Garcia

**Grandmother**

Indian Blood:  
Tribe & Degree

Romula

**Grandfather**

Indian Blood:  
Tribe & Degree

DOD: 1974  
33-6503 (A.8078)  
dob: 7-15-11

Elena (Sanches) Sayers

**Mother**

(1/4) Mission  
 Indian Blood:  
Tribe & Degree

3/8

*Sayers-Roods, et al. v. Machado (CAND, May 25, 2022)*

# **EXHIBIT C**

Plaintiff Sayers-Roods Birth Cert.  
(shows nexus to Ann-Marie Sayers)

# STATE OF CALIFORNIA

## CERTIFICATE OF VITAL RECORD

### COUNTY OF SAN BENITO

HOLLISTER, CALIFORNIA

104 -

#### CERTIFICATE OF LIVE BIRTH STATE OF CALIFORNIA

3500-227

VOL

41

PAGE

410

1A. NAME OF CHILD - FIRST		1B. MIDDLE		1C. LAST		LOCAL REGISTRATION NUMBER AND CERTIFICATE NUMBER	
Kennyon		Al-Roo-Ah		Mukurman		Sayers-Roods	
2A. SEX		2B. THIS BIRTH SEQUENCE OR IF ADOPTED, THE CHILD		2C. DATE OF BIRTH		2D. MONTHS WHEN CLERK FILED	
Female		single		July 3, 1988		0833	
3A. PLACE OF BIRTH		3B. NAME OF HOSPITAL OR FACILITY		3C. STREET ADDRESS		3D. NUMBER OF APARTMENT OR RESIDENCE	
Hazel Hawkins Hospital		911 Sunset Drive					
4A. CITY OR TOWN		4B. COUNTY		4C. STATE OF BIRTH		4D. AGE OF FATHER	
Hollister		San Benito		CA		48	
5A. NAME OF FATHER		5B. MIDDLE		5C. LAST		5D. STATE OF BIRTH	
Richard		Berford		Roods		NY	
6A. NAME OF MOTHER		6B. MIDDLE		6C. LAST		6D. STATE OF BIRTH	
Ann-Marie		Veleline		Sayers		CA	
7A. NAME OF FATHER		7B. MIDDLE		7C. LAST		7D. STATE OF BIRTH	
Ann-Marie		Veleline		Sayers		CA	
8A. NAME OF MOTHER		8B. MIDDLE		8C. LAST		8D. STATE OF BIRTH	
Ann-Marie		Veleline		Sayers		CA	
9A. NAME OF FATHER		9B. MIDDLE		9C. LAST		9D. STATE OF BIRTH	
Ann-Marie		Veleline		Sayers		CA	
10A. NAME OF MOTHER		10B. MIDDLE		10C. LAST		10D. STATE OF BIRTH	
Ann-Marie		Veleline		Sayers		CA	
11A. NAME OF FATHER		11B. MIDDLE		11C. LAST		11D. STATE OF BIRTH	
Ann-Marie		Veleline		Sayers		CA	
12A. NAME OF MOTHER		12B. MIDDLE		12C. LAST		12D. STATE OF BIRTH	
Ann-Marie		Veleline		Sayers		CA	
13A. NAME OF FATHER		13B. MIDDLE		13C. LAST		13D. STATE OF BIRTH	
Ann-Marie		Veleline		Sayers		CA	
14A. NAME OF MOTHER		14B. MIDDLE		14C. LAST		14D. STATE OF BIRTH	
Ann-Marie		Veleline		Sayers		CA	
15A. NAME OF FATHER		15B. MIDDLE		15C. LAST		15D. STATE OF BIRTH	
Ann-Marie		Veleline		Sayers		CA	
16A. NAME OF MOTHER		16B. MIDDLE		16C. LAST		16D. STATE OF BIRTH	
Ann-Marie		Veleline		Sayers		CA	
17A. NAME OF FATHER		17B. MIDDLE		17C. LAST		17D. STATE OF BIRTH	
Ann-Marie		Veleline		Sayers		CA	
18A. NAME OF MOTHER		18B. MIDDLE		18C. LAST		18D. STATE OF BIRTH	
Ann-Marie		Veleline		Sayers		CA	
19A. NAME OF FATHER		19B. MIDDLE		19C. LAST		19D. STATE OF BIRTH	
Ann-Marie		Veleline		Sayers		CA	
20A. NAME OF MOTHER		20B. MIDDLE		20C. LAST		20D. STATE OF BIRTH	
Ann-Marie		Veleline		Sayers		CA	
21A. NAME OF FATHER		21B. MIDDLE		21C. LAST		21D. STATE OF BIRTH	
Ann-Marie		Veleline		Sayers		CA	
22A. NAME OF MOTHER		22B. MIDDLE		22C. LAST		22D. STATE OF BIRTH	
Ann-Marie		Veleline		Sayers		CA	
23A. NAME OF FATHER		23B. MIDDLE		23C. LAST		23D. STATE OF BIRTH	
Ann-Marie		Veleline		Sayers		CA	
24A. NAME OF MOTHER		24B. MIDDLE		24C. LAST		24D. STATE OF BIRTH	
Ann-Marie		Veleline		Sayers		CA	
25A. NAME OF FATHER		25B. MIDDLE		25C. LAST		25D. STATE OF BIRTH	
Ann-Marie		Veleline		Sayers		CA	
26A. NAME OF MOTHER		26B. MIDDLE		26C. LAST		26D. STATE OF BIRTH	
Ann-Marie		Veleline		Sayers		CA	
27A. NAME OF FATHER		27B. MIDDLE		27C. LAST		27D. STATE OF BIRTH	
Ann-Marie		Veleline		Sayers		CA	
28A. NAME OF MOTHER		28B. MIDDLE		28C. LAST		28D. STATE OF BIRTH	
Ann-Marie		Veleline		Sayers		CA	
29A. NAME OF FATHER		29B. MIDDLE		29C. LAST		29D. STATE OF BIRTH	
Ann-Marie		Veleline		Sayers		CA	
30A. NAME OF MOTHER		30B. MIDDLE		30C. LAST			

Kanyon-berth-cert-photo.jpg

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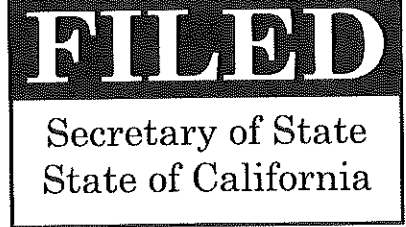
*Sayers-Roods, et al. v. Machado (CAND, May 25, 2022)*

# **EXHIBIT D**

Tribal 501c3 Org Papers from CA-SOS;  
Chualar-Costanoan Tribe Roll List



**California Secretary of State  
Electronic Filing**



**Corporation - Statement of Information**

Entity Name: COSTANOAN INDIAN RESEARCH, INC.

Entity (File) Number: C1270176  
File Date: 03/02/2022  
Entity Type: Corporation  
Jurisdiction: CALIFORNIA  
Document ID: H287955

**Detailed Filing Information**

1. Entity Name: COSTANOAN INDIAN RESEARCH, INC.
2. Business Addresses:
  - a. Street Address of Principal Office in California:

1 Indian Canyon Road  
Indian Canyon, California 95023  
United States of America
  - b. Mailing Address:

PO Box 28  
Hollister, California 95024  
United States of America
3. Officers:
  - a. Chief Executive Officer:

Kanyon Sayers-Roods  
1 Indian Canyon Road  
Indian Canyon, California 95023  
United States of America
  - b. Secretary:

Charles Heinz  
1 Indian Canyon Road  
Indian Canyon, California 95023  
United States of America

Document ID: H287955



## California Secretary of State Electronic Filing

Officers (Cont'd):

c. Chief Financial Officer:

Thomas Bishop  
1 Indian Canyon Road  
Indian Canyon, California 95023  
United States of America

4. Agent for Service of Process:

Ann-Marie Sayers  
1 Indian Canyon Road  
Indian Canyon, Hollister, California 95023  
United States of America

By signing this document, I certify that the information is true and correct and that I am authorized by California law to sign.

Electronic Signature: s/ Kanyon Sayers-Roods

*Use [bizfile.sos.ca.gov](https://bizfile.sos.ca.gov) for online filings, searches, business records, and resources.*

Document ID: H287955



**COSTANOAN INDIAN RESEARCH, INC. - BOARD RESOLUTION**

**MINUTES OF A MEETING OF DIRECTORS** of COSTANOAN INDIAN RESEARCH, INC., holding a corporate office at 1 Indian Canyon Road, Hollister, California 95023 (the "Corporation"); a special meeting held in the State of California on this 25<sup>th</sup> day of February, 2022.

1. The following members were present:

Kanyon Sayers-Roods, Secretary, Co-Chair, & Chief Director

Kanyon Sayers-Roods, Treasurer & CFO.

And, under Cal. Corp. Code(s) § 7225, Charles Heinz was appointed as a provisional director and Acting Secretary of Corporation.

2. **UPON A MOTION DULY MADE**, seconded and unanimously carried, Kanyon Sayers-Roods (Secretary, CFO, Chief Director) acted as Chairperson of the meeting and Charles Heinz (Senior Board Advisor, Acting Secretary, Provisional Director) as Secretary of the meeting.

3. The Chairperson noted that notice of this meeting was properly provided to each director within the time periods required by the bylaws of the Corporation and the laws of the State of California. Accordingly, the Chairperson called the meeting to order.

4. Minutes of the last regular meeting were read and after extensive discussion and, upon motion duly made, seconded and carried, were adopted with the identified amendments.

5. The Chairperson presented to the meeting and thereupon the following resolutions were offered, seconded and unanimously adopted.

**IT WAS RESOLVED THAT:**

1. The following individuals are appointed and confirmed as signing officers for the Corporation for a term of four years or until replaced and are authorized to manage all business interests, including bank accounts that have been established for the benefit of the Corporation, sign and endorse checks, drafts, and other orders of payment for those bank or investment accounts, are

authorized to manage legal-decision making, and sign bills of lading, and other corporate documents, as needed and reasonable, for the normal conduct of the business of the Corporation:

Kanyon Sayers-Roods, President, Chief Director, Co-Chair;  
Thomas Bishop, Treasurer-Chief Financial Officer; and  
Charles Heinz, Secretary-Executive Vice President.

2. The Corporation will not require an audit for the most recent fiscal year ended and an auditor will not be appointed for the Corporation for the upcoming year.

3. The following individuals are appointed and confirmed as officers of the Corporation for a term of one year or until replaced:

Kanyon Sayers-Roods: President, Co-Chair, Chief Director;  
Thomas A. Bishop: Treasurer, Chief Financial Officer (CFO), Director; and  
Charles Heinz: Secretary, Executive Vice President (EVP), Director.

4. Ann-Marie Sayers is removed as President, Chairman of the Board of the Corporation effective immediately for the following cause:

February 19, 2022, a special meeting was held among the director(s)/officer(s) of official record under Statement of Information (Calif. SOS Entity C1270176 - Doc. ID No. GR71526, Mar. 17, 2021), and a provisional director under Cal. Corp. Code(s) § 7225, whereby resulted in a majority vote of two of three officers/directors of Corporation vetting that this corporate position should be reassigned pursuant Cal. Corp. Code(s) § 7221, § 7222(a)(1), § 7224 (Article 3 of the California Nonprofit Corporation Law). Whereas, Corporation's founder, Ann-Marie Sayers shall remain a board director, Co-Chair of the Board of Directors, and Registered Agent of Corporation, with voting rights pursuant to Cal. Corp. Code § 7610. Corporation's cause of action for this change was to make good faith efforts to uphold legislation prescribed under Cal. Corp. Code § 7238 and § 7215, under preventative measures to preclude the possibility of a vacancy, inter alia relative to a deceased or professionally incompetent officer or director as defined under Cal. Corp. Code § 7221.

Board Resolution

Page 3 of 3

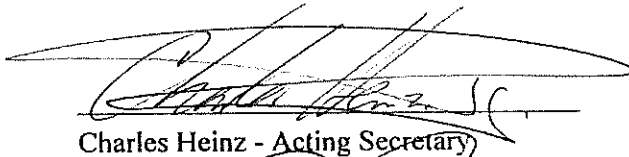
The office of President, Chairman of the Board is now vacant. Whereas, has been replaced with the reassigned co-chair, Kanyon Sayers-Roods, who is the daughter of the former chairman and president, Ann-Marie Sayers.

And, Kanyon Sayers-Roods has been removed as Secretary and Chief Financial Officer of Corporation in accordance with Article 3 of the California Nonprofit Corporation Law.

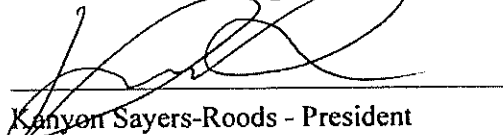
5. Thereby, Corporation shall adopt Bylaws that become effective from the date of certification by Secretary and President declared hereinbelow.

6. There being no further business to come before the meeting, the meeting was adjourned.

7. Dated in the State of California on the 25<sup>th</sup> day of February, 2022.



Charles Heinz - Acting Secretary



Kanyon Sayers-Roods - President

See many attachment  
2/25/2022

## CALIFORNIA CERTIFICATE OF ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California )

County of Santa Clara )

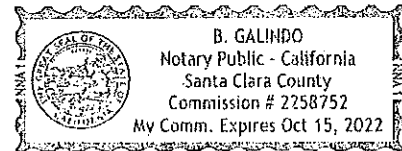
On February 25, 2022 before me, B. Galindo, Notary Public,  
(here insert name and title of the officer)

personally appeared Charles Heinz & Karyen Sager Reed

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature [Signature]

(Seal)

## Optional Information

Although the information in this section is not required by law, it could prevent fraudulent removal and reattachment of this acknowledgment to an unauthorized document and may prove useful to persons relying on the attached document.

## Description of Attached Document

The preceding Certificate of Acknowledgment is attached to a document titled/for the purpose of Costanran Indian Researn Inc.

Board Resolution  
containing 3 pages, and dated 02/25/2022

The signer(s) capacity or authority is/are as:

- ☐ Individual(s)  
☐ Attorney-in-Fact  
☐ Corporate Officer(s) \_\_\_\_\_  
Title(s)

- ☐ Guardian/Conservator  
☐ Partner - Limited/General  
☐ Trustee(s)  
☐ Other: \_\_\_\_\_

representing: \_\_\_\_\_  
Name(s) of Person(s) or Entity(ies) Signer Is Representing

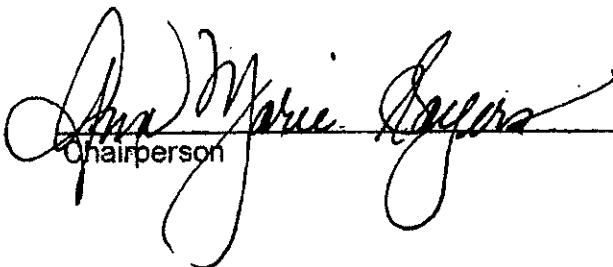
Additional Information	
<b>Method of Signer Identification</b>	
Proved to me on the basis of satisfactory evidence: <input type="radio"/> form(s) of identification <input type="radio"/> credible witness(es)	
Notarial event is detailed in notary journal on: Page # _____ Entry # _____	
Notary contact: _____	
<b>Other</b>	
<input type="checkbox"/> Additional Signer(s)	<input type="checkbox"/> Signer(s) Thumbprint(s)
<input type="checkbox"/>	

**CHULAR INDIANS OF INDIAN CANYON MEMBER ROLL SHEET**

*This member roll sheet will be completed at the beginning of each year by the General Governing Council Chairperson. Any child born after the roll sheet have been completed will be added to next year's roll sheet. However, the child will receive the full benefits entitled to every enrolled member upon his/her birth.*

	<b>NAME:</b>	<b>DATE OF BIRTH:</b>
01.	<u>Ann-Marie Sayers</u>	<u>October 13, 1948</u>
02.	<u>Christopher Sayers</u>	<u>October 24, 1951</u>
03.	<u>Kanyon Sayers-Roods</u>	<u>July 3, 1988</u>
04.	<u></u>	<u></u>
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DATE: JANUARY 1, 2008

  
Chairperson

**CHULAR INDIANS OF INDIAN CANYON MEMBER ROLL SHEET**

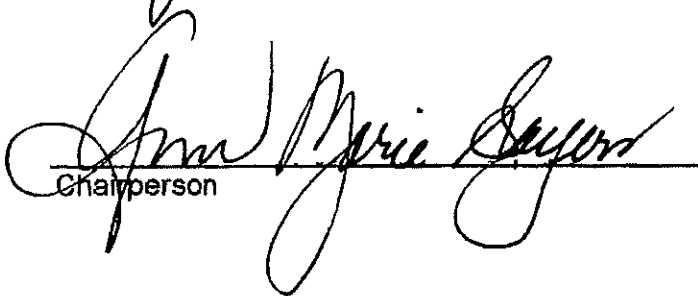
*This member roll sheet will be completed at the beginning of each year by the General Governing Council Chairperson. Any child born after the roll sheet have been completed will be added to next year's roll sheet. However, the child will receive the full benefits entitled to every enrolled member upon his/her birth.*

	<b>NAME:</b>	<b>DATE OF BIRTH:</b>
01.	Ann-Marie Sayers	October 13, 1948
02.	Christopher Sayers	October 24, 1951
03.	Kanyon Sayers-Roods	July 3, 1988
04.		
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08.		
09.		
10.		

DATE:

January 1, 2007

Chairperson

  
Ann Marie Sayers

*Ana Marie Gaynor*  
Chairperson

**CHULAR INDIANS OF INDIAN CANYON MEMBER ROLL SHEET**

*This member roll sheet will be completed at the beginning of each year by the General Governing Council Chairperson. Any child born after the roll sheet have been completed will be added to next year's roll sheet. However, the child will receive the full benefits entitled to every enrolled member upon his/her birth.*

	<b>NAME:</b>	<b>DATE OF BIRTH:</b>
01.	<u>Ann-Marie Sayers</u>	<u>October 13, 1948</u>
02.	<u>Christopher Sayers</u>	<u>October 24, 1951</u>
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DATE:

January 3, 2005

Ann Marie Sayers  
Chairperson





~~Chairperson~~

NAME:

**DATE OF BIRTH:**

DATE:

Chairperson

## CHULAR INDIANS OF INDIAN CANYON MEMBER ROLL SHEET

*This member roll sheet will be completed at the beginning of each year by the General Governing Council Chairperson. Any child born after the roll sheet have been completed will be added to next year's roll sheet. However, the child will receive the full benefits entitled to every enrolled member upon his/her birth.*

	NAME:	DATE OF BIRTH:
01.	<u>Ann-Marie Sayers</u>	<u>October 13, 1948</u>
02.	<u>Christopher Sayers</u>	<u>October 24, 1951</u>
03.	<u>Kanyon Sayers-Roods</u>	<u>July 3, 1988</u>
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DATE: January 5, 2004

Ann Marie Sayers  
Chairperson



Chairperson



ANNA MARIE SAYERS  
Chairperson



**DATE OF BIRTH:**

Chairperson

**CHULAR INDIANS OF INDIAN CANYON MEMBER ROLL SHEET**

*This member roll sheet will be completed at the beginning of each year by the General Governing Council Chairperson. Any child born after the roll sheet have been completed will be added to next year's roll sheet. However, the child will receive the full benefits entitled to every enrolled member upon his/her birth.*

	<b>NAME:</b>	<b>DATE OF BIRTH:</b>
01.	<u>Ann-Marie Sayers</u>	<u>October 13, 1948</u>
02.	<u>Christopher Sayers</u>	<u>October 24, 1951</u>
03.	<u>Kanyon Sayers-Roods</u>	<u>July 3, 1988</u>
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DATE:

January 6, 1995

Ann Marie Sayers  
Chairperson

**CHUALAR INDIANS OF INDIAN CANYON MEMBER ROLL SHEET**

*This member roll sheet will be completed at the beginning of each year by the General Governing Council Chairperson. Any child born after the roll sheet have been completed will be added to next year's roll sheet. However, the child will receive the full benefits entitled to every enrolled member upon his/her birth.*

**NAME:****DATE OF BIRTH:**01. Ann-Marie SayersOctober 13, 194802. Christpoher SayersOctober 24, 195103. Kanyon Sayers-RoodsJuly 3, 1988

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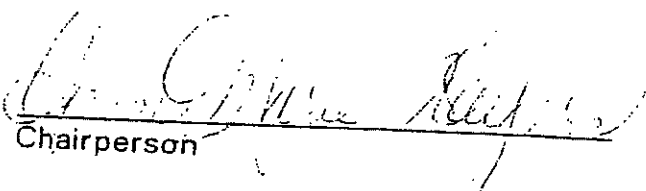
06. \_\_\_\_\_

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DATE: January 1, 1994
  
 Chairperson

# CHUALAR INDIANS OF INDIAN CANYON MEMBER ROLL SHEET

*This member roll sheet will be completed at the beginning of each year by the General Governing Council Chairperson. Any child born after the roll sheet have been completed will be added to next year's roll sheet. However, the child will receive the full benefits entitled to every enrolled member upon his/her birth.*

NAME:

DATE OF BIRTH:

01. <u>Ann-Marie Sayers</u>	<u>October 13, 1948</u>
02. <u>Christopher Sayers</u>	<u>October 24, 1951</u>
03. <u>Kanyon Sayers-Roods</u>	<u>July 3, 1988</u>
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DATE: January 2, 1993

*Ann Marie Sayers*  
Chairperson

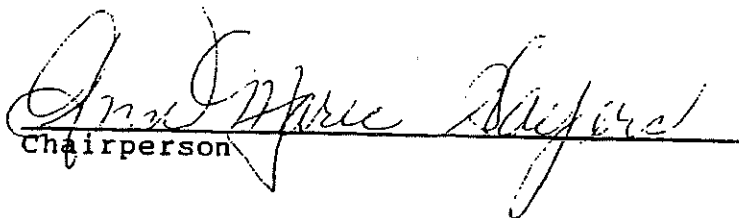
CHUALAR INDIANS OF INDIAN CANYON MEMBER ROLL SHEET

NAME:

DATE OF BIRTH:

1. <u>Ann-Marie Sayers</u>	<u>October 13, 1948</u>
2. <u>Christopher Sayers</u>	<u>October 24, 1951</u>
3. <u>Kanyon Sayers-Roods</u>	<u>July 3, 1988</u>
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DATE: January 2, 1992

  
Chairperson

CHUALAR INDIANS OF INDIAN CANYON MEMBER ROLL SHEET

NAME:	DATE OF BIRTH:
1. <u>Ann-Marie Sayers</u>	<u>October 13, 1948</u>
2. <u>Christopher Sayers</u>	<u>October 24, 1951</u>
3. <u>Kanyon Sayers-Roods</u>	<u>July 3, 1988</u>
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DATE: January 1, 1991

Ann Marie Sayers  
Chairperson

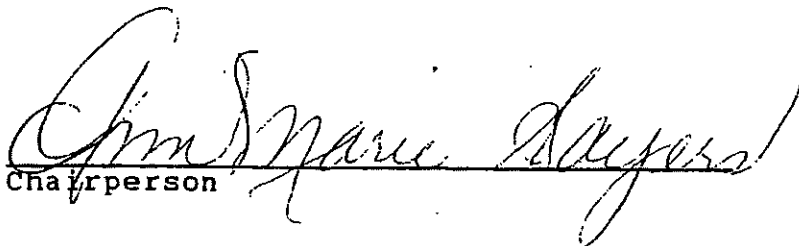
CHUALAR INDIANS OF INDIAN CANYON MEMBER ROLL SHEET

NAME:

DATE OF BIRTH:

1. Ann-Marie Sayers	October 13, 1948
2. Christopher Sayers	October 24, 1951
3. Kanyon Sayers-Roods	July 3, 1988
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DATE: January 3, 1990

  
Chairperson

CHUALAR INDIANS OF INDIAN CANYON MEMBER ROLL SHEET

NAME:	DATE OF BIRTH:
1. <u>Ann-Marie Sayers</u>	<u>October 13, 1948</u>
2. <u>Christopher Sayers</u>	<u>October 24, 1951</u>
3. <u>Kanyon Sayers-Roods</u>	<u>July 3, 1988</u>
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DATE: January 5, 1989

Ann Marie Sayers  
Chairperson



CHUALAR INDIANS OF INDIAN CANYON MEMBER ROLL SHEET

NAME:	DATE OF BIRTH:
1. <u>Ann-Marie Sayers</u>	<u>October 13, 1948</u>
2. <u>Christopher Sayers</u>	<u>October 24, 1951</u>
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DATE: January 1, 1988

Ann Marie Sayers  
Chairperson

CHUALAR INDIANS OF INDIAN CANYON MEMBER ROLL SHEET

NAME:	DATE OF BIRTH:
1. <u>Ann-Marie Sayers</u>	<u>October 13, 1948</u>
2. <u>Christopher Sayers</u>	<u>October 24, 1951</u>
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DATE: January 2, 1987

ANN MARIE SAYERS  
Chairperson

CHUALAR INDIANS OF INDIAN CANYON MEMBER ROLL SHEET

NAME:	DATE OF BIRTH:
1. <u>Ann-Marie Sayers</u>	<u>October 13, 1948</u>
2. <u>Christopher Sayers</u>	<u>October 24, 1951</u>
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DATE: January 3, 1986

Ann-Marie Sayers  
Chairperson

CHUALAR INDIANS OF INDIAN CANYON MEMBER ROLL SHEET

NAME:	DATE OF BIRTH:
1. <u>Ann-Marie Sayers</u>	<u>October 13, 1948</u>
2. <u>Christopher Sayers</u>	<u>October 24, 1951</u>
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DATE: January 1, 1985

Ann Marie Sayers  
Chairperson

CHUALAR INDIANS OF INDIAN CANYON MEMBER ROLL SHEET

NAME:	DATE OF BIRTH:
1. <u>Ann-Marie Sayers</u>	<u>October 13, 1948</u>
2. <u>Christopher Sayers</u>	<u>October 24, 1951</u>
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DATE: January 2, 1984

Ann Marie Sayers  
Chairperson

CHUALAR INDIANS OF INDIAN CANYON MEMBER ROLL SHEET

NAME:	DATE OF BIRTH:
1. <u>Ann-Marie Sayers</u>	<u>October 13, 1948</u>
2. <u>Christopher Sayers</u>	<u>October 24, 1951</u>
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DATE: January 2, 1983

Ann Marie Sayers  
Chairperson

CHUALAR INDIANS OF INDIAN CANYON MEMBER ROLL SHEET

NAME:

DATE OF BIRTH:

1. Ann-Marie Sayers

October 13, 1948

2. Christopher Sayers

October 24, 1951

3. \_\_\_\_\_

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DATE: January 3, 1982

Ann Marie Sayers  
Chairperson

CHUALAR INDIANS OF INDIAN CANYON MEMBER ROLL SHEET

NAME:	DATE OF BIRTH:
1. <u>Ann-Marie Sayers</u>	<u>October 13, 1948</u>
2. <u>Christopher Sayers</u>	<u>October 24, 1951</u>
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DATE: January 1, 1981

Ann Marie Sayers  
Chairperson



CHUALAR INDIANS OF INDIAN CANYON MEMBER ROLL SHEET

NAME:

DATE OF BIRTH:

1. Ann-Marie Sayers

October 13, 1948

2. Christopher Sayers

October 24, 1951

3. \_\_\_\_\_

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6. \_\_\_\_\_

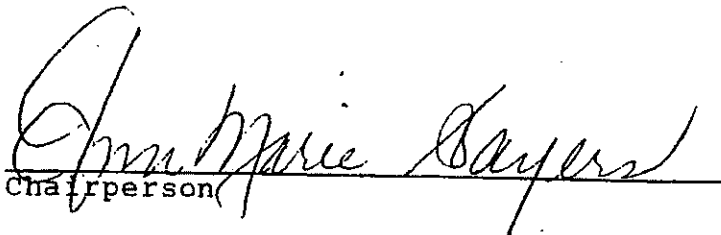
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DATE: January 1, 1980

  
Chairperson

CHUALAR INDIANS OF INDIAN CANYON MEMBER ROLL SHEET

NAME:

DATE OF BIRTH:

1. Ann Marie Sayers

Oct. 13, 1948

2. Chris Sayers

Oct. 24, 1957

3. \_\_\_\_\_

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4. \_\_\_\_\_

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DATE: JANUARY 4, 1979

Ann Marie Sayers  
Chairperson

CHUALAR INDIANS OF INDIAN CANYON MEMBER ROLL SHEET

NAME:	DATE OF BIRTH:
1. Christopher Sayers	Oct. 24, 1998
2. Ann Marie Sayers	Oct. 13, 1948
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____

DATE: January 1, 1978

Ann Marie Sayers  
chairperson

CHUALAR INDIANS OF INDIAN CANYON MEMBER ROLL SHEET

NAME:

DATE OF BIRTH:

1. <u>CHRIS SAYERS</u>	<u>OCTOBER 24, 1951</u>
2. <u>ANN MARIE SAYERS</u>	<u>OCTOBER 13, 1948</u>
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____

DATE: JAN 3, 1977

Ann Marie Sayers  
Chairperson

CHUALAR INDIANS OF INDIAN CANYON MEMBER ROLL SHEET

NAME:

DATE OF BIRTH:

1. <u>ANN-MARIE SAYERS</u>	<u>OCTOBER 13, 1948</u>
2. <u>CHRIS SAYERS</u>	<u>OCTOBER 24, 1950</u>
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____

DATE:

JAN 3, 1976

Ann Marie Sayers  
Chairperson

CHUALAR INDIANS OF INDIAN CANYON MEMBER ROLL SHEET

NAME:	DATE OF BIRTH:
1. Christopher Sayer	Oct. 24, 1951
2. Ann Marie Sayer	Oct. 13, 1948
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____

DATE: Jan 1, 1975

Ann Marie Sayer  
Chairperson